

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

123 William St, 10th Floor

Check if different  
than previously  
reported. (ACC)

New York

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

NY

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 20 2016

through

M M / D D / Y Y Y Y Y Y  
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gustafson, Liz, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
12 23 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y  
11 / 28 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">1143446.70</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">2761001.60</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2609845.73</span>	<span style="border: 1px solid black; padding: 2px;">20948749.67</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">5370847.33</span>	<span style="border: 1px solid black; padding: 2px;">22092196.37</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">4614792.35</span>	<span style="border: 1px solid black; padding: 2px;">21336141.39</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">756054.98</span>	<span style="border: 1px solid black; padding: 2px;">756054.98</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">554802.45</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Planned Parenthood Votes**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10		20		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
11		28		2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

333750.00

17059269.54

(ii) Unitemized .....

125.00

11210.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

333875.00

17070479.54

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2133720.60

3736020.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

2467595.60

20806499.54

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

142250.13

142250.13

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

2609845.73

20948749.67

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

2609845.73

20948749.67

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1152921.23	3175580.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1152921.23	3175580.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	200000.00	1893034.37
24. Independent Expenditures (use Schedule E) .....	2512935.44	12557939.12
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000000.00
29. Other Disbursements (Including Non-Federal Donations).....	748935.68	2709587.30
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4614792.35	21336141.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4614792.35	21336141.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2467595.60	20806499.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2467595.60	19831043.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1152921.23	3175580.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1152921.23	3175580.60

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFH'G7 <98I @G 'CF' +H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

After a voluntary review of our records, we are submitting this amendment to a) update in-kind contributions made to the committee and their corresponding independent expenditures to their actual values (including removing receipt A2016-15307 from Sch. A as it erroneously duplicates A2016-15219 as reported on the M10); b) correct the reporting of in-kinds made by the committee to certain NH state entities (see line 29); c) remove disbursements [B635027, B635029, and B635030] that erroneously duplicate another disbursement [B636471]; d) update Independent Expenditures and Other Disbursements incurred in this reporting period (including removal of disbursement B636500 to vendor Community Outreach Group LLC and application of that payment to the updated expenditures); and e) update the debt schedule and summary pages accordingly

Form/Schedule: F3XA

Transaction ID:

Note that transactions A2016-15303 and B633899-B633902, and A2016-15313 and B636596 and B635166, list the correct name of the entity that made the in-kind contributions of canvassing and direct voter contact to the committee. When transactions B633899-B633902 were first reported on the 24-hr report filed on 10/21/16, and transactions B636596 and B635166 were reported on this report as originally filed 12/8/16, they were erroneously attributed to the wrong entity.

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 145

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amundson, Benjamin, , ,

Mailing Address 456 Thornton Avenue

City

San Francisco

State

CA

Zip Code

94124-2561

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 15 / 2016

Transaction ID : A2016-2262914

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ballard, Marion, , ,

Mailing Address 4413 Chalfont Place

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : A2016-2262915

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beeuwkes, Nancy, , Ms.,

Mailing Address 1360 Monument Street

City

Concord

State

MA

Zip Code

01742-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2016

Transaction ID : A2016-2262916

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

101250.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 145

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. D'Angeac, Ellen, , ,

Mailing Address 18 Echo Bay Drive

City

New Rochelle

State

NY

Zip Code

10805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

Retail

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : A2016-2262917

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drake, Judith, , ,

Mailing Address 7307 24th Avenue NE

City

Seattle

State

WA

Zip Code

98115-5809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : A2016-2262918

Amount of Each Receipt this Period

12500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ferris, Nancy, , ,

Mailing Address 5601 Kirkside Dr

City

Chevy Chase

State

MD

Zip Code

20815-7113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2016

Transaction ID : A2016-2262919

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

13250.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 145

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grove, Karen, F, Ms.,

Mailing Address 3826 Alameda De Las Pulgas

City  
Menlo ParkState  
CAZip Code  
94025-6210FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 01 / 2016

Transaction ID : A2016-2262920

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gupta, Shashikant, , ,

Mailing Address 11925 Triple Crown Road

City  
RestonState  
VAZip Code  
20191-3015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2016

Transaction ID : A2016-2262921

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hart Rice, Edward, , ,

Mailing Address 2217 Halcyon Lane

City  
ViennaState  
VAZip Code  
22181-3042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2016

Transaction ID : A2016-2262922

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

111000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 145

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hessel, Susan, , ,**

Mailing Address 26 Mt. Archer Road

City  
Lyme

State  
CT

Zip Code  
06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A2016-2262923**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Huffer, Joan, , ,**

Mailing Address 10 Wolfe Street

City  
Alexandria

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A2016-2262924**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kaiser, Charlene, , ,**

Mailing Address 774 Live Oak Place

City  
Pipe Creek

State  
TX

Zip Code  
78063-5425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : A2016-2262925**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 145

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Leavitt, Maribelle, , ,**

Mailing Address 3450 Sacramento Street

City

San Francisco

State

CA

Zip Code

94118-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2016

**Transaction ID : A2016-2262941**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Leeds, Sunita, , Ms.,**

Mailing Address 3205 R Street

City

Washington

State

DC

Zip Code

20007-2941

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016

**Transaction ID : A2016-2262926**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lewis, Lilian, , ,**

Mailing Address 242 S. Peck Drive

City

Beverly Hills

State

CA

Zip Code

90212-3713

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2016

**Transaction ID : A2016-2262927**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mills, Bonnie, , ,**

Mailing Address 4702 Shadow Lane

City  
Austin

State  
TX

Zip Code  
78731-5335

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

VP Clinical Operations

Occupation (for Individual)

Hillhurst Biopharmaceuticals Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2016

**Transaction ID : A2016-2262928**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nickel, Adele, , ,**

Mailing Address PO Box 60679

City

Bakersfield

State

CA

Zip Code

93386

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 08 / 2016

**Transaction ID : A2016-2262930**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nielsen, Jadine, , ,**

Mailing Address 1 Keahole Place

City

Honolulu

State

HI

Zip Code

96825-3425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 20 / 2016

**Transaction ID : A2016-2262931**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PP Advocacy Project, of LA County, , ,**

Mailing Address 555 Capitol Mall

City  
Sacramento

State  
CA

Zip Code  
95814-3320

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Applicable

Occupation (for Individual)  
Not Applicable

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247084.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

**Transaction ID : A2016-2262933**

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Poss, Ellen, M, Dr.,**

Mailing Address 450 Warren Street

City  
Brookline

State  
MA

Zip Code  
02445-5907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

**Transaction ID : A2016-2262934**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Singer, Barbara, , ,**

Mailing Address 320 East 23rd Street

City  
New York

State  
NY

Zip Code  
10010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

**Transaction ID : A2016-2262936**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tiemann, Amy, , Dr.,**

Mailing Address 740 Gimghoul Road

City  
Chapel Hill

State  
NC

Zip Code  
27514-3811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Spark Productions

Occupation (for Individual)  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

**Transaction ID : A2016-2262937**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trent, Melanie, , ,**

Mailing Address 8212 E Tortuga View Lane

City  
Scottsdale

State  
AZ

Zip Code  
85266-1911

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2016

**Transaction ID : A2016-2262938**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

333750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Priorities USA Action**

Mailing Address 601 13th Street NW Suite 610N

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

1774000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016

**Transaction ID : A2016-15327**

Amount of Each Receipt this Period

732200.60

☐ Memo Item

In-kind contribution of digital ad buys. See Schedule E-

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Planned Parenthood Action Fund Inc. PAC**

Mailing Address 123 William St 10th Floor

City  
New York

State  
NY

Zip Code  
10038

FEC ID number of contributing  
federal political committee.

C C00314617

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016

**Transaction ID : A2016-15318**

Amount of Each Receipt this Period

200000.00

☐ Memo Item

Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AFT Solidarity**

Mailing Address 555 New Jersey Avenue NW

City  
Washington

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify)  
Not Applicable

Aggregate Year-to-Date ▼

350000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

**Transaction ID : A2016-15320**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Federal PAC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1032200.60

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. NEXTGEN CLIMATE

Mailing Address 351 California Street, #1200

City

San Francisco

State  
CA

Zip Code  
94104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

322000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : A2016-15321**

Amount of Each Receipt this Period

322000.00

☐ Memo Item  
Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B. United We Can

Mailing Address 1800 Massachusetts Ave., NW

City

Washington

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

166800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : A2016-15324**

Amount of Each Receipt this Period

166800.00

☐ Memo Item  
Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C. American Bridge 21st Century

Mailing Address 455 Massachusetts Ave. NW Floor 6

City

Washington

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify)  
Not Applicable

Aggregate Year-to-Date ▼

350000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2016

**Transaction ID : A2016-15319**

Amount of Each Receipt this Period

350000.00

☐ Memo Item  
Federal PAC

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

838800.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. International Alliance of Theatrical Stage Employee**

Mailing Address 207 W 25th Street/4th Fl.

City  
New YorkState  
NYZip Code  
10001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Not Applicable

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

Transaction ID : A2016-15322

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Priorities USA Action**

Mailing Address 601 13th Street NW Suite 610N

City  
WashingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Not Applicable

Aggregate Year-to-Date ▼

2024000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2016

Transaction ID : A2016-15323

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
 Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. United We Can**

Mailing Address 1800 Massachusetts Ave., NW

City  
WashingtonState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify)  
 Not Applicable

Aggregate Year-to-Date ▼

174520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2016

Transaction ID : A2016-15325

Amount of Each Receipt this Period

7720.00

☐ Memo Item  
 Federal PAC

SUBTOTAL of Receipts This Page (optional).....▶

262720.00

TOTAL This Period (last page this line number only).....▶

2133720.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Bend the Arc Jewish Action, Inc.**

Mailing Address 330 Seventh Ave., 19th floor

City  
New York

State  
NY

Zip Code  
10001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

21644.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2016

**Transaction ID : A2016-15326**

Amount of Each Receipt this Period

21644.00

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 634640, 634641, 634634 & 634636

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Planned Parenthood Central Coast Action Fund**

Mailing Address 518 Garden Street

City

Santa Barbara

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7164.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

**Transaction ID : A2016-15302**

Amount of Each Receipt this Period

7164.23

☐ Memo Item

In-kind contribution of canvassing. See Schedule E.  
Transactions 633895-633898

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Planned Parenthood Affiliates of California**

Mailing Address 555 Capitol Mall Suite 510

City

Sacramento

State

CA

Zip Code

95814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1986.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2016

**Transaction ID : A2016-15306**

Amount of Each Receipt this Period

1986.20

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 634534-634537

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30794.43

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PP Advocacy Project LA County**

Mailing Address 555 Capitol Mall/ Ste. 1425

City  
Sacramento

State  
CA

Zip Code  
95814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

155000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2016

**Transaction ID : A2016-15305**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E. Transactions 633903-633906

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. We Vote-Nosotros Votamos-PP Advoc. Mar Monte PAC**

Mailing Address 1605 The Alameda

City  
San Jose

State  
CA

Zip Code  
95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2016

**Transaction ID : A2016-15303**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E. Transactions 633899-633902

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. We Vote-Nosotros Votamos-PP Advoc. Mar Monte PAC**

Mailing Address 1605 The Alameda

City  
San Jose

State  
CA

Zip Code  
95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

48734.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2016

**Transaction ID : A2016-15308**

Amount of Each Receipt this Period

28734.00

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E. Transactions 634109-634112

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53734.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Planned Parenthood Northern California Action Fund**

Mailing Address P.O. Box 1116

City  
Concord

State  
CA

Zip Code  
94522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9953.16

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

**Transaction ID : A2016-15309**

Amount of Each Receipt this Period

9953.16

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 634539-634542

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Comm. Action Fund of PP of Orange and San Bernardino Ctys.**

Mailing Address P.O. Box 6145

City  
Orange

State  
CA

Zip Code  
92863

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2799.25

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2016

**Transaction ID : A2016-15310**

Amount of Each Receipt this Period

2799.25

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 635156-635159

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. PP Action Fund of the Pacific SW**

Mailing Address 1075 Camino del Rio South

City  
San Diego

State  
CA

Zip Code  
92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6569.88

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2016

**Transaction ID : A2016-15311**

Amount of Each Receipt this Period

6569.88

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 635170-635173

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19322.29

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PP Advocacy Project LA County**

Mailing Address 555 Capitol Mall/ Ste. 1425

City  
Sacramento

State  
CA

Zip Code  
95814

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

193284.41

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 05 / 2016

**Transaction ID : A2016-15312**

Amount of Each Receipt this Period

38284.41

☐ Memo Item

In-kind contribution of Canvassing. See Schedule E.  
Transactions 635183-635186

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Planned Parenthood New Hampshire Action Fund**

Mailing Address 18 Low Avenue

City  
Concord

State  
NH

Zip Code  
03301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2016

**Transaction ID : A2016-15313**

Amount of Each Receipt this Period

115.00

☐ Memo Item

In-kind contribution of of staff time. See Schedule E.  
Transactions B636596 and B635166

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38399.41

142250.13

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Stott Development Solutions Group, Inc**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

Mailing Address 3605 Wilshire Ave

FEC Identification Number

**C****Transaction ID : B636398**

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemCity  
San MateoState  
CAZip Code  
94403Purpose of Disbursement  
Fundraising Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Full Name (Last, First, Middle Initial)

**B. Hustle INC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	1	6		

Mailing Address 251 Kearney St, Ste 300

FEC Identification Number

**C****Transaction ID : B636405**

Amount of Each Disbursement this Period

7500.00

☐ Memo ItemCity  
San FranciscoState  
CAZip Code  
94108Purpose of Disbursement  
Software Licensing

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Full Name (Last, First, Middle Initial)

**C. Terris, Barnes, Walters**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	1	6		

Mailing Address 400 Montgomery Street, Suite 700

FEC Identification Number

**C****Transaction ID : B636406**

Amount of Each Disbursement this Period

6425.08

☐ Memo ItemCity  
San FranciscoState  
CAZip Code  
94104Purpose of Disbursement  
Non-candidate specific GOTV canvass lit

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18925.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Terris, Barnes, Walters**

Mailing Address 400 Montgomery Street, Suite 700

City  
San FranciscoState  
CAZip Code  
94104Purpose of Disbursement  
Non-candidate specific GOTV canvass lit

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	6		2	0	1	6		

FEC Identification Number

C

Transaction ID : B636409

Amount of Each Disbursement this Period

21834.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stott Development Solutions Group, Inc**

Mailing Address 3605 Wilshire Ave

City  
San MateoState  
CAZip Code  
94403Purpose of Disbursement  
Fundraising Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	8		2	0	1	6		

FEC Identification Number

C

Transaction ID : B636412

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Trister Ross Schadler and Gold, PLLC**

Mailing Address 1666 Connecticut Ave NW,/#5

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Legal Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	2		2	0	1	6		

FEC Identification Number

C

Transaction ID : B636403

Amount of Each Disbursement this Period

1494.98

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

28329.86

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Precision Strategies LLC**

Mailing Address 901 New York Avenue NW/Ste. 530

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Communications Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636388

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hart Research Associates**

Mailing Address 1724 Connecticut Avenue NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Research Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636392

Amount of Each Disbursement this Period

3562.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jamille Fields**

Mailing Address 1110 Vermont Ave NW,/Ste 300

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Travel Expenses

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636402

Amount of Each Disbursement this Period

575.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5637.50

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
non-candidate specific GOTV canvassing

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2016			

FEC Identification Number

C

Transaction ID : B636383

Amount of Each Disbursement this Period

54800.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Berlin Rosen LTD**

Mailing Address 501 Third Street NW

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Communications Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2016			

FEC Identification Number

C

Transaction ID : B636407

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Civis Analytics Inc.**

Mailing Address PO Box 4042

City  
ChicagoState  
ILZip Code  
60654Purpose of Disbursement  
Database Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C

Transaction ID : B636404

Amount of Each Disbursement this Period

1924.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76724.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund Inc.**

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
Reimbursement for Program Staff time

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2016					

FEC Identification Number

C

Transaction ID : B636384

Amount of Each Disbursement this Period

114224.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund Inc.**

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
Reimbursement for facilities, supplies, admin and fundraising services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				26				2016					

FEC Identification Number

C

Transaction ID : B636389

Amount of Each Disbursement this Period

675000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund Inc.**

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
Reimbursement for Program Staff time

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				14				2016					

FEC Identification Number

C

Transaction ID : B636408

Amount of Each Disbursement this Period

104625.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

893850.72

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund Inc.**

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	1	7		2	0	1	6		

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
Reimbursement for Program Staff travel expenses

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B636411

Amount of Each Disbursement this Period

20113.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund Inc.**

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	1	1	2	2		2	0	1	6		

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
Reimbursement for Program Staff time

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B636413

Amount of Each Disbursement this Period

104163.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cornucopia Inc**

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	0		2	5		2	0	1	6		

Mailing Address 880 Springdale Dr.

City  
ExtonState  
PAZip Code  
19341Purpose of Disbursement  
Catering Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B636385

Amount of Each Disbursement this Period

1174.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125451.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address P.O. Box 27025

City  
RichmondState  
VAZip Code  
23261Purpose of Disbursement  
Merchant Fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636399

Amount of Each Disbursement this Period

646.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Moxie Media Inc**

Mailing Address 2021 Minor Ave East

City  
SeattleState  
WAZip Code  
99102Purpose of Disbursement  
Non candidate specific Canvass Lit

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636382

Amount of Each Disbursement this Period

10640.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Moxie Media Inc**

Mailing Address 2021 Minor Ave East

City  
SeattleState  
WAZip Code  
99102Purpose of Disbursement  
Non candidate specific canvass lit

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636391

Amount of Each Disbursement this Period

6498.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17784.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. House Majority PAC**

Mailing Address 700 13th St. NW, Ste 600

City  
WashingtonState  
DCZip Code  
20005

Purpose of Disbursement

Drawdown against value of in-kind research; see B634325 (M10) and  
B634906 on Sched E, this rpt

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : B934325

Amount of Each Disbursement this Period

-8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Advocates of Ohio**

Mailing Address 206 E State St.

City  
ColumbusState  
OHZip Code  
43215

Purpose of Disbursement

Drawdown against pre-payment on M10 rpt; See Sched E on this report

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B934911

Amount of Each Disbursement this Period

-27872.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. API Source**

Mailing Address 2229 North Pollard St

City  
LanhamState  
MDZip Code  
20706

Purpose of Disbursement

Shipping

Candidate Name

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : B936395

Amount of Each Disbursement this Period

198.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

-35674.13

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. API Source**

Mailing Address 2229 North Pollard St

City  
LanhamState  
MDZip Code  
20706Purpose of Disbursement  
Non candidate specific promotional materials

003

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2016			

FEC Identification Number

C

Transaction ID : B936391

Amount of Each Disbursement this Period

19530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. API Source**

Mailing Address 2229 North Pollard St

City  
LanhamState  
MDZip Code  
20706Purpose of Disbursement  
Non candidate specific promotional materials

003

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2016			

FEC Identification Number

C

Transaction ID : B936392

Amount of Each Disbursement this Period

1820.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address 942 S. Shady Grove Rd.

City  
MemphisState  
TNZip Code  
38120Purpose of Disbursement  
Shipment of non candidate specific promotional materials

003

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2016			

FEC Identification Number

C

Transaction ID : B936393

Amount of Each Disbursement this Period

447.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21798.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Premier Global Services**Mailing Address 3280 Peachtree Rd. NE  
Ste 100City  
AtlantaState  
GAZip Code  
30305Purpose of Disbursement  
Teleconferencing Services

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	2	2		2	0	1	6		

FEC Identification Number

C

Transaction ID : B936394

Amount of Each Disbursement this Period

93.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

93.12

**TOTAL** This Period (last page this line number only).....▶

1152921.23

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Senate Majority PAC**

Mailing Address 700 13th Street NW Suite 600

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Contribution to federal committee

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	7			2	0	1	6		

FEC Identification Number

C C00484642

**Transaction ID : B636359**

Amount of Each Disbursement this Period

200000.00

Contribution to federal committee

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

200000.00

**TOTAL** This Period (last page this line number only).....▶

200000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Political Committee of PP Advocates of AZ**

Mailing Address 4751 N. 15th Street

City  
PhoenixState  
AZZip Code  
85014Purpose of Disbursement  
Contribution to non-federal state committee in AZ

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2016					

FEC Identification Number

C

Transaction ID : B636365

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Terris, Barnes, Walters**

Mailing Address 400 Montgomery Street, Suite 700

City  
San FranciscoState  
CAZip Code  
94104Purpose of Disbursement  
Canvass lit for PA state candidate

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2016					

FEC Identification Number

C

Transaction ID : B636364

Amount of Each Disbursement this Period

11019.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SKDKnickerbocker**

Mailing Address 1150 18th St., NW #800

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Digital Ad Buy for NH state candidate

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C

Transaction ID : B636368

Amount of Each Disbursement this Period

5151.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

116170.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. The Pivot Group**

Mailing Address 1701 I Street NW Suite 550

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Canvass Lit for NH state candidate

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2016			

FEC Identification Number

C

Transaction ID : B636372

Amount of Each Disbursement this Period

10410.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SKDKnickerbocker**

Mailing Address 1150 18th St., NW #800

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Digital Ad Production for NH state candidate

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2016			

FEC Identification Number

C

Transaction ID : B636374

Amount of Each Disbursement this Period

24750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Pivot Group**

Mailing Address 1701 I Street NW Suite 550

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Canvass lit re NV state candidates

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2016			

FEC Identification Number

C

Transaction ID : B634191

Amount of Each Disbursement this Period

10242.85

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45402.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Canvassing for NH state office/candidates

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2016			

FEC Identification Number

C

Transaction ID : B636471

Amount of Each Disbursement this Period

26723.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Pivot Group**

Mailing Address 1701 I Street NW Suite 550

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Canvass lit re NV state candidates

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

FEC Identification Number

C

Transaction ID : B636486

Amount of Each Disbursement this Period

843.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CENTER FOR POPULAR DEMOCRACY ACTION FUND**

Mailing Address 1875 Connecticut Ave NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Contribution to non-federal committee

012

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2016			

FEC Identification Number

C

Transaction ID : B636470

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

37566.83

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. KANSAS VALUES INSTITUTE**

Mailing Address 200 W. Douglas, Ste. 600

City  
WichitaState  
KSZip Code  
67202Purpose of Disbursement  
Contribution for non-federal state committee in KS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636379

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Maine Action Fund PAC**

Mailing Address 443 Congress St, 3rd Floor

City  
PortlandState  
MEZip Code  
04101Purpose of Disbursement  
Contribution for non-federal State Committee in ME

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636377

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michigan Planned Parenthood Votes**

Mailing Address PO Box 15041

City  
LansingState  
MIZip Code  
48901Purpose of Disbursement  
Contribution to non-federal state committee in MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Not Applicable

011

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B636373

Amount of Each Disbursement this Period

75000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood NH Votes**

Mailing Address 18 Low Avenue

City  
ConcordState  
NHZip Code  
03301Purpose of Disbursement  
Contribution for non-federal committee in NH

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C

Transaction ID : B636376

Amount of Each Disbursement this Period

284000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
In-kind contrib.to PP New Hampshire Action Fund of staff time for NH state elections

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C

Transaction ID : B635021

Amount of Each Disbursement this Period

22811.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
In-kind contrib.to PP New Hampshire Votes of staff time for NH state elections

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C

Transaction ID : B635022

Amount of Each Disbursement this Period

850.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

307661.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 145

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		04		2016

Mailing Address 123 William St, 10th Floor

City  
New YorkState  
NYZip Code  
10038Purpose of Disbursement  
In-kind contrib.to United We Can of staff time for NH state elections

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B636117

Amount of Each Disbursement this Period

12135.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Votes New Mexico IEPAC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		20		2016

Mailing Address 719 San Mateo Blvd. NE

City  
AlbuquerqueState  
NMZip Code  
87108Purpose of Disbursement  
Contribution to non-federal state committee in NM

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State: District:

FEC Identification Number

C

Transaction ID : B636367

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

92135.00

**TOTAL** This Period (last page this line number only).....▶

748935.68

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 39 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MackCrounse Group

Nature of Debt (Purpose):

Canvass literature

Mailing Address 2001 N. Beauregard St. Ste 420

City

Alexandria

State

VA

Zip Code

22311

Outstanding Balance Beginning This Period

3950.00

Transaction ID : D439020

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SKDKnickerbocker LLC

Nature of Debt (Purpose):

Production Fees: Television Advertisement

Mailing Address 1150 18th Street NW/Ste. 800

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

55060.00

Transaction ID : D439027

Amount Incurred This Period

46076.00

Payment This Period

46076.00

Outstanding Balance at Close of This Period

55060.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

O'Brien Garrett (formerly known as OMP Inc.)

Nature of Debt (Purpose):

Printing of IE mail piece and fundraising  
mailer. See schedule E

Mailing Address 1133 19th St. NW #300

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

23788.68

Transaction ID : D439029

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23788.68

1) **SUBTOTALS** This Period This Page (optional)..... ►

82798.68

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Itzamna Translations Company

Nature of Debt (Purpose):

Translation services. Note correction to  
beginning debt amt. See schedule E

Mailing Address P.O. Box 1015

City  
GlendaleState  
AZZip Code  
85311

Outstanding Balance Beginning This Period

422.55

Transaction ID : D439030

Amount Incurred This Period

359.16

Payment This Period

359.16

Outstanding Balance at Close of This Period

63.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alliance Marketing Distributor Inc.

Nature of Debt (Purpose):

Printing of postcards and posters See  
schedule E

Mailing Address 133 Industrial Ave.

City  
Hasbrouck HeightsState  
NJZip Code  
07604

Outstanding Balance Beginning This Period

884.58

Transaction ID : D439032

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

884.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Network Solutions

Nature of Debt (Purpose):

Purchase of domain name. See schedule E

Mailing Address 13861 Sunrise Valley Dr. #300

City  
HerndonState  
VAZip Code  
20171

Outstanding Balance Beginning This Period

15.99

Transaction ID : D439033

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.99

1) SUBTOTALS This Period This Page (optional)..... ►

963.96

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 41 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Rocky Mountains Action Fund

Nature of Debt (Purpose):  
Events. See schedule E

Mailing Address 7155 E. 38th Avenue

City  
DenverState  
COZip Code  
80207

Outstanding Balance Beginning This Period

25375.51

Transaction ID : D439038

Amount Incurred This Period

0.00

Payment This Period

25375.51

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Terris Barnes &amp; Walters

Nature of Debt (Purpose):  
Canvass Lit-Estimated costs. See Schedule E

Mailing Address 400 Montgomery St # 700

City  
San FranciscoState  
CAZip Code  
94104

Outstanding Balance Beginning This Period

31913.07

Transaction ID : D439041

Amount Incurred This Period

8807.00

Payment This Period

8807.00

Outstanding Balance at Close of This Period

31913.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Outreach Group

Nature of Debt (Purpose):  
Canvassing. See Schedule E

Mailing Address 1110 Vermont Ave N.W. #300

City  
WashingtonState  
DCZip Code  
20050

Outstanding Balance Beginning This Period

487606.71

Transaction ID : D439042

Amount Incurred This Period

429178.37

Payment This Period

916785.08

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

31913.07

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 42 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Pivot Group

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 1720 I Street NW Suite 550

City

Washington

State

DC

Zip Code

20005

Outstanding Balance Beginning This Period

51155.00

Transaction ID : D439043

Amount Incurred This Period

68763.90

Payment This Period

98203.90

Outstanding Balance at Close of This Period

21715.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Journeyman Press

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 11 Malcolm Hoyt Dr.

City

Newburyport

State

MA

Zip Code

01950

Outstanding Balance Beginning This Period

1263.00

Transaction ID : D439044

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1263.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx Print Center

Nature of Debt (Purpose):

Canvassing Lit. See Schedule E

Mailing Address 3 Colby Ct.

City

Bedford

State

NH

Zip Code

03110

Outstanding Balance Beginning This Period

1470.00

Transaction ID : D439045

Amount Incurred This Period

246.26

Payment This Period

0.00

Outstanding Balance at Close of This Period

1716.26

1) **SUBTOTALS** This Period This Page (optional)..... ►

24694.26

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 43 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Interactive

Nature of Debt (Purpose):

Online Advertising. Actual billed amount  
changed to 35250.00 See Schedule E

Mailing Address 2229 North Pollard St

City  
ArlingtonState  
VAZip Code  
22207

Outstanding Balance Beginning This Period

116950.00

Transaction ID : D439047

Amount Incurred This Period

350828.00

Payment This Period

300828.00

Outstanding Balance at Close of This Period

166950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

API Source

Nature of Debt (Purpose):

Distribution Costs. See Schedule E

Mailing Address 2229 North Pollard St

City  
LanhamState  
MDZip Code  
20706

Outstanding Balance Beginning This Period

1427.00

Transaction ID : D439048

Amount Incurred This Period

0.00

Payment This Period

1427.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Franciska Farkas

Nature of Debt (Purpose):

Digital Ad Production. See Schedule E

Mailing Address 102 Clinton Ave.

City  
BrooklynState  
NYZip Code  
11205

Outstanding Balance Beginning This Period

11000.00

Transaction ID : D439049

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

1) SUBTOTALS This Period This Page (optional)..... ►

177950.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 44 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Priorities USA

Nature of Debt (Purpose):

Digital Ad Production. See Schedule E

Mailing Address 601 13th Street NW Suite 610N

City

Washington

State

DC

Zip Code

20005

Outstanding Balance Beginning This Period

10000.00

Transaction ID : D439050

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Viridiana Vidal Gonzzali

Nature of Debt (Purpose):

Media Consulting. See Schedule E

Mailing Address 4012 Linniki Street

City

North Las Vegas

State

NV

Zip Code

89032

Outstanding Balance Beginning This Period

20000.00

Transaction ID : D439051

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mission Control LLC

Nature of Debt (Purpose):

Canvass Lit. See Schedule E

Mailing Address 624 Hebron Ave #200

City

Glastonbury

State

CT

Zip Code

06033

Outstanding Balance Beginning This Period

5689.00

Transaction ID : D439052

Amount Incurred This Period

16500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22189.00

1) SUBTOTALS This Period This Page (optional)..... ►

52189.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 45 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Work for Progress Inc

Nature of Debt (Purpose):

Canvassing. See Schedule E

Mailing Address 1543 Wazee St #440

City  
DenverState  
COZip Code  
80202

Outstanding Balance Beginning This Period

35400.00

Transaction ID : D439053

Amount Incurred This Period

55770.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

91170.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stones' Phones

Nature of Debt (Purpose):

Phone Calls. See Schedule E

Mailing Address 41-750 Rancho Las Palmas Dr  
#E-3City  
Rancho MirageState  
CAZip Code  
92270

Outstanding Balance Beginning This Period

2416.40

Transaction ID : D439055

Amount Incurred This Period

51368.13

Payment This Period

53784.53

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

76 Words

Nature of Debt (Purpose):

Online Video Production. See Schedule E

Mailing Address 1806 Vernon St, NW  
#300City  
WashingtonState  
DCZip Code  
20009

Outstanding Balance Beginning This Period

14671.42

Transaction ID : D439056

Amount Incurred This Period

13443.65

Payment This Period

4650.00

Outstanding Balance at Close of This Period

23465.07

1) SUBTOTALS This Period This Page (optional)..... ►

114635.07

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 46 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ib5k, LLC

Nature of Debt (Purpose):

Online video production. See Schedule E

Mailing Address 343 Carl Street

City

San Francisco

State

CA

Zip Code

94117

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439064

Amount Incurred This Period

35000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Action Fund Inc.

Nature of Debt (Purpose):

Staff time. See Schedule E

Mailing Address 123 William St, 10th Floor

City

New York

State

NY

Zip Code

20038

Outstanding Balance Beginning This Period

0.00

Transaction ID : D439070

Amount Incurred This Period

34658.41

Payment This Period

0.00

Outstanding Balance at Close of This Period

34658.41

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

69658.41

2) TOTALS This Period (last page this line number only)..... ►

554802.45

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

554802.45

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 47 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Priorities USA</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24603.86</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: _____    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Priorities USA</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">457.93</div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President    District: _____    State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">1943906.45</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">25061.79</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 48 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>Priorities USA</b>			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination	
Mailing Address 601 13th Street NW Suite 610N						<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20005				Amount	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A			Category/Type <input type="text"/> 004			<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NV	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/> 1943906.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>Priorities USA</b>			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination	
Mailing Address 601 13th Street NW Suite 610N						<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20005				Amount	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A			Category/Type <input type="text"/> 004			<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Toomey, Pat, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: PA	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/> 2667767.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 4118.15
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]  
 Signature Date  /  /



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 49 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Mailing Address 123 William St, 10th Floor				Amount <span style="border: 1px solid black; padding: 2px;">101.16</span>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: Portman, Rob, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1076550.04</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Mailing Address 123 William St, 10th Floor				Amount <span style="border: 1px solid black; padding: 2px;">101.15</span>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: Strickland, Ted, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1076550.04</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 50 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 123 William St, 10th Floor				Amount <span style="border: 1px solid black; padding: 2px;">101.15</span>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: Clinton, Hillary, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 123 William St, 10th Floor				Amount <span style="border: 1px solid black; padding: 2px;">101.15</span>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;">0.00</span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"></span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"></span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 51 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">310.27</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629924</b>		
Purpose of Expenditure Volunteer Recruitment		Category/Type 001	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">310.27</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629925</b>		
Purpose of Expenditure Volunteer Recruitment		Category/Type 001	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">620.54</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 52 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2016	
Mailing Address 7155 E. 38th Avenue				Amount <span style="border: 1px solid black; padding: 2px;">310.26</span>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Volunteer Recruitment				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2016	
Mailing Address 7155 E. 38th Avenue				Amount <span style="border: 1px solid black; padding: 2px;">310.26</span>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Volunteer Recruitment				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;">620.52</span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 53 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">1085.97</span>		
City Denver		State CO	Zip Code 80207		Transaction ID : <b>B629929</b>
Purpose of Expenditure Phone Calls		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">4308940.94</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">37615.00</span>		
City Washington		State DC	Zip Code 20005		Transaction ID : <b>B629976</b>
Purpose of Expenditure Canvassing		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">4308940.94</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">38700.97</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 54 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">37615.01</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629977</b>		
Purpose of Expenditure Canvassing		Category/Type 003	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">1085.97</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629930</b>		
Purpose of Expenditure Phone Calls		Category/Type 007	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">38700.98</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 55 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 7155 E. 38th Avenue				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1085.98</div>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1943906.45</div>				<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1943906.45</div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 7155 E. 38th Avenue				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1085.98</div>	
City Denver		State CO		Zip Code 80207	
Purpose of Expenditure Phone Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	
Name of Federal Candidate: Heck, Joseph, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1943906.45</div>				<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1943906.45</div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2171.96</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				<div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address <b>7155 E. 38th Avenue</b>				
City <b>Denver</b>	State <b>CO</b>	Zip Code <b>80207</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>930.84</span> </div>	
Purpose of Expenditure <b>Canvassing</b>			Transaction ID : <b>B629933</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">20</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: <b>Heck, Joseph, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>1943906.45</span> </div>				

Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address <b>7155 E. 38th Avenue</b>				
City <b>Denver</b>	State <b>CO</b>	Zip Code <b>80207</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>930.84</span> </div>	
Purpose of Expenditure <b>Canvassing</b>			Transaction ID : <b>B629934</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">20</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: <b>Cortez-Masto, Catherine, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>1943906.45</span> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	1861.68
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

12

23

2016

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 57 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 7155 E. 38th Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">930.83</div>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629935</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Purpose of Expenditure Canvassing		Category/ Type 003	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 7155 E. 38th Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">930.83</div>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629937</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Purpose of Expenditure Canvassing		Category/ Type 003	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">1861.66</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">3102.80</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B629939</b>		
Purpose of Expenditure Events		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">131668.16</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629941</b>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">134770.96</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 59 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Bully Pulpit Interactive</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1140 Connecticut Ave NW #800				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>	
City Washington		State DC		Zip Code 20036	
Purpose of Expenditure Digital Ad Buy-Estimated costs				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Comstock, Barbara, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">206391.26</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 123 William St, 10th Floor				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">222.74</div>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">50000.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , <span style="float: right;">[Electronically Filed]</span> Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount <span style="border: 1px solid black; padding: 2px;">10980.69</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B633871</b>		
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>PA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2667767.46</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount <span style="border: 1px solid black; padding: 2px;">1373.77</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B633873</b>		
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">12354.46</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Priorities USA</b>				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 21 / 2016         </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1373.78         </div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: inline-block;">1943906.45</div>	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Priorities USA</b>				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 21 / 2016         </div>	
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           246038.60         </div>	
City Washington		State DC		Zip Code 20005	
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">247412.38</div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				<div style="text-align: center;"> <b>[Electronically Filed]</b> </div>	
				Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            12 / 23 / 2016         </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
City New York		State NY	Zip Code 10038		
Purpose of Expenditure Staff time for direct voter contact		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Amount <span style="border: 1px solid black; padding: 2px;">222.74</span>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
City New York		State NY	Zip Code 10038		
Purpose of Expenditure Staff time for direct voter contact		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Amount <span style="border: 1px solid black; padding: 2px;">222.73</span>	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 22 / 2016       </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 22 / 2016       </div>		
Mailing Address 123 William St, 10th Floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         222.74       </div>		
City New York	State NY	Zip Code 10038	<b>Transaction ID : B633890</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 22 / 2016       </div>		
Purpose of Expenditure Staff time for direct voter contact		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Cortez-Masto, Catherine, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         1943906.45       </div>	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 22 / 2016       </div>		
Mailing Address 123 William St, 10th Floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         5000.00       </div>		
City New York	State NY	Zip Code 10038	<b>Transaction ID : B633891</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 22 / 2016       </div>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         4308940.94       </div>	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: US Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		<b>[Electronically Filed]</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          12 / 23 / 2016       </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
City New York		State NY	Zip Code 10038		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">4308940.94</span>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President			District: _____ State: <u>US</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
City New York		State NY	Zip Code 10038		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">1076550.04</span>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <u>OH</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		
[Electronically Filed]					



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 65 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 123 William St, 10th Floor			Amount <input type="text"/>		
City New York	State NY	Zip Code 10038	Transaction ID : <b>B633894</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Portman, Rob, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1076550.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Central Coast Action Fund</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 555 Capitol Mall/Suite 510			Amount <input type="text"/>		
City Sacramento	State CA	Zip Code 95814	Transaction ID : <b>B633895</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/Type <input type="text"/> 003	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4308940.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<input type="text"/> 1719.05		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<input type="text"/>		
<b>(a) TOTAL Independent Expenditures .....</b>			<input type="text"/>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Central Coast Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 555 Capitol Mall/Suite 510			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>1719.06</span> </div>	
City Sacramento	State CA	Zip Code 95814	<b>Transaction ID : B633896</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>4308940.94</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Central Coast Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 555 Capitol Mall/Suite 510			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>1719.06</span> </div>	
City Sacramento	State CA	Zip Code 95814	<b>Transaction ID : B633897</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>1943906.45</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>3438.12</span> </div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span></span> </div>	
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span></span> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Central Coast Action Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address <b>555 Capitol Mall/Suite 510</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1719.06</div>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95814</b>	<b>Transaction ID : B633898</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: <b>Cortez-Masto, Catherine, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1943906.45</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address <b>1605 The Alameda</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	
City <b>San Jose</b>	State <b>CA</b>	Zip Code <b>95126</b>	<b>Transaction ID : B633899</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: <b>Clinton, Hillary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">6719.06</div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>		
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B633900</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>		
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B633901</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1943906.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016	
Mailing Address 1605 The Alameda			Amount <span style="border: 1px solid black; padding: 2px;">5000.00</span>	
City San Jose	State CA	Zip Code 95126	Transaction ID : <b>B633902</b>	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>PP Advocacy Project LA County</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016	
Mailing Address 555 Capitol Mall, Suite 510			Amount <span style="border: 1px solid black; padding: 2px;">1250.00</span>	
City Sacramento	State CA	Zip Code 95814	Transaction ID : <b>B633903</b>	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>US</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">6250.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 70 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Advocacy Project LA County</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address <b>555 Capitol Mall, Suite 510</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1250.00</div>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95814</b>	<b>Transaction ID : B633904</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure <b>Canvassing-Estimated costs.In-Kind, see Sched A</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Name of Federal Candidate: <b>Clinton, Hillary, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>US</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Advocacy Project LA County</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address <b>555 Capitol Mall, Suite 510</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1250.00</div>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95814</b>	<b>Transaction ID : B633905</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure <b>Canvassing-Estimated costs.In-Kind, see Sched A</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Name of Federal Candidate: <b>Heck, Joseph, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1943906.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2500.00</div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]			Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">12</div> / <div style="border: 1px solid black; padding: 2px;">23</div> / <div style="border: 1px solid black; padding: 2px;">2016</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>PP Advocacy Project LA County</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
Mailing Address 555 Capitol Mall, Suite 510			Amount <span style="border: 1px solid black; padding: 2px;">1250.00</span>		
City Sacramento	State CA	Zip Code 95814	Transaction ID : <b>B633906</b>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type 003	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 123 William St, 10th Floor			Amount <span style="border: 1px solid black; padding: 2px;">3100.00</span>		
City New York	State NY	Zip Code 10038	Transaction ID : <b>B634105</b>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/Type 001	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1250.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 123 William St, 10th Floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3100.00</div>		
City New York	State NY	Zip Code 10038	<b>Transaction ID : B634106</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 123 William St, 10th Floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3100.00</div>		
City New York	State NY	Zip Code 10038	<b>Transaction ID : B634107</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Toomey, Pat, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2667767.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , , [Electronically Filed]  
 Signature Date  /  /



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Mailing Address 123 William St, 10th Floor		Amount <span style="border: 1px solid black; padding: 2px;">3100.00</span>	
City New York	State NY	Zip Code 10038	<b>Transaction ID : B634108</b>
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016
Name of Federal Candidate: McGinty, Katie, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2667767.46</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <span style="border: 1px solid black; padding: 2px;">131668.16</span>	
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B629940</b>
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">131668.16</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Blueprint Interactive</b>			<input type="checkbox"/> Memo Item		
Mailing Address 2229 North Pollard St			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2016		
City Arlington	State VA	Zip Code 22207	Amount <span style="border: 1px solid black; padding: 2px;">170150.00</span>		
Purpose of Expenditure Digital Ad Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B633886</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Name of Federal Candidate: Ayotte, Kelly, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2016		
City Washington	State DC	Zip Code 20005	Amount <span style="border: 1px solid black; padding: 2px;">80500.00</span>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Transaction ID : <b>B632653</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">250650.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 14 / 2016</div> </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">80500.00</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B632654</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 24 / 2016</div> </div>		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 03 / 2016</div> </div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">18272.48</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B629894</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 24 / 2016</div> </div>		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">98772.48</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 23 / 2016</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Amount <span style="border: 1px solid black; padding: 2px;">5434.46</span>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Volunteer Recruitment		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Amount <span style="border: 1px solid black; padding: 2px;">5434.46</span>	
Name of Federal Candidate: Trump, Donald, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;">10868.92</span>					
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"></span>					
<b>(a) TOTAL</b> Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"></span>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14491.90</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B629900</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 24 / 2016		
Purpose of Expenditure Phone Calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 03 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14491.90</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B629901</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 24 / 2016		
Purpose of Expenditure Phone Calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>			
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">28983.80</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		<b>[Electronically Filed]</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing		Category/Type 003		Amount 10858.44	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing		Category/Type 003		Amount 10868.92	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶ 21727.36					
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶					
<b>(a) TOTAL</b> Independent Expenditures ..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		
			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">10868.92</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629908</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">21737.84</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629909</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Purpose of Expenditure Events		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">32606.76</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</span>		
Mailing Address 1806 Vernon Street, Ste. #100			Amount <span style="border: 1px solid black; padding: 2px;">550.00</span>		
City Washington	State DC	Zip Code 20009	Transaction ID : <b>B634085</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</span>		
Purpose of Expenditure Digital Ad Production-note correction to estimate reported earlier		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">1943906.45</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Liz Figueroa</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</span>		
Mailing Address 35 Martins Beach Road			Amount <span style="border: 1px solid black; padding: 2px;">1146.60</span>		
City Half Moon Bay	State CA	Zip Code 94019	Transaction ID : <b>B634088</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">11 / 08 / 2016</span>		
Purpose of Expenditure Travel-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">1943906.45</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1696.60</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">12 / 23 / 2016</span>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Liz Figueroa</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 35 Martins Beach Road			Amount <input type="text"/>		
City Half Moon Bay	State CA	Zip Code 94019	Transaction ID : <b>B634089</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Travel-Estimated costs		Category/ Type <input type="text"/> 002	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4308940.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Liz Figueroa</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 35 Martins Beach Road			Amount <input type="text"/>		
City Half Moon Bay	State CA	Zip Code 94019	Transaction ID : <b>B634090</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Travel-Estimated costs		Category/ Type <input type="text"/> 002	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4308940.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016		
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2293.20</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(a) TOTAL</b> Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Liz Figueroa</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 35 Martins Beach Road			Amount <input type="text"/>		
City Half Moon Bay	State CA	Zip Code 94019	Transaction ID : <b>B634091</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Travel-Estimated costs		Category/ Type <input type="text"/> 002	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1943906.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Priorities USA</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 601 13th Street NW Suite 610N			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634092</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4308940.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<input type="text"/> 26768.23		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<input type="text"/>		
<b>(a) TOTAL</b> Independent Expenditures .....			<input type="text"/>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Priorities USA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount <span style="border: 1px solid black; padding: 2px;">3452.10</span>		
City Washington		State DC	Zip Code 20005		Transaction ID : <b>B634093</b>
Purpose of Expenditure Digital Ad Buy. In-Kind, see Sched. A			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Priorities USA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount <span style="border: 1px solid black; padding: 2px;">13315.14</span>		
City Washington		State DC	Zip Code 20005		Transaction ID : <b>B634094</b>
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">16767.24</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Mailing Address 601 13th Street NW Suite 610N			Amount <span style="border: 1px solid black; padding: 2px;">76864.95</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634095</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2667767.46</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">1285.71</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634686</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016	
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		
Name of Federal Candidate: Titus, Dina, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>01</b> <input type="checkbox"/> President State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1655.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">78150.66</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 85 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		Amount <span style="border: 1px solid black; padding: 2px;">1285.71</span>	
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1655.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
City Washington		State DC	Zip Code 20005		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		Amount <span style="border: 1px solid black; padding: 2px;">1285.71</span>	
Name of Federal Candidate: Kihuen, Ruben, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1655.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... <span style="border: 1px solid black; padding: 2px;">2571.42</span>					
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....					
<b>(a) TOTAL</b> Independent Expenditures .....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b>			New report    Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address <b>41-750 Rancho Las Palmas Dr #E-3</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12000.00         </div>	
City <b>Rancho Mirage</b>	State <b>CA</b>	Zip Code <b>92270</b>	<b>Transaction ID : B634103</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Purpose of Expenditure <b>Phone calls-Estimated costs</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: <b>Clinton, Hillary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>US</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           4308940.94         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address <b>41-750 Rancho Las Palmas Dr #E-3</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12000.00         </div>	
City <b>Rancho Mirage</b>	State <b>CA</b>	Zip Code <b>92270</b>	<b>Transaction ID : B634104</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Purpose of Expenditure <b>Phone calls-Estimated costs</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: <b>Trump, Donald, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>US</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           4308940.94         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           24000.00         </div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           24000.00         </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 23 / 2016         </div>	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 87 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>20</span> <span>2016</span> </div>	
Mailing Address 1806 Vernon St, NW #100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>		
City Washington	State DC	Zip Code 20009			
Purpose of Expenditure Digital Ad Production-Final costs		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>20</span> <span>2016</span> </div>	
Mailing Address 1806 Vernon St, NW #100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>		
City Washington	State DC	Zip Code 20009			
Purpose of Expenditure Digital Ad Production-Final cost		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12
23
2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>House Majority PAC</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 25 / 2016</div> </div>	
Mailing Address 2100 Pennsylvania Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : B634096</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 25 / 2016</div> </div>
Purpose of Expenditure In-kind research services-Estimated costs.See Line 21b		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Comstock, Barbara, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">206391.26</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>76 Words</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 24 / 2016</div> </div>	
Mailing Address 1806 Vernon Street, Ste. #100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">650.00</div>	
City Washington	State DC	Zip Code 20009	<b>Transaction ID : B634086</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 25 / 2016</div> </div>
Purpose of Expenditure Digital Ad Production-Final costs		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Toomey, Pat, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2667767.46</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">8650.00</div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 23 / 2016</div> </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>76 Words</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 1806 Vernon St, NW #100			Amount <span style="border: 1px solid black; padding: 2px;">650.00</span>		
City Washington		State DC	Zip Code 20009		Transaction ID : <b>B634087</b>
Purpose of Expenditure Digital Ad Production-Final costs			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
Mailing Address 41-750 Rancho Las Palmas Dr #E-3			Amount <span style="border: 1px solid black; padding: 2px;">16000.00</span>		
City Rancho Mirage		State CA	Zip Code 92270		Transaction ID : <b>B634098</b>
Purpose of Expenditure Phone calls-Estimated costs			Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: Bennett, LuAnn, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>10</b> State: <b>VA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">206391.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">16650.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>SKDKnickerbocker</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1150 18th St., NW #800</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2016</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Amount <span style="border: 1px solid black; padding: 2px;">7050.00</span>		
Purpose of Expenditure <b>Digital Ad Production</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B633011</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 25 / 2016</b>		
Name of Federal Candidate: <b>Ayotte, Kelly, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>SKDKnickerbocker</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1150 18th St., NW #800</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 11 / 2016</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Amount <span style="border: 1px solid black; padding: 2px;">9125.00</span>		
Purpose of Expenditure <b>Digital Ad Production</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B633012</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 25 / 2016</b>		
Name of Federal Candidate: <b>Ayotte, Kelly, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">16175.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>Gustafson, Liz, , ,</b>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>12 / 23 / 2016</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7183.50</div>	
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B634109</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7183.50</div>	
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B634110</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">14367.00</div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 25 / 2016         </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           7183.50         </div>	
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B634111</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 25 / 2016         </div>	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A			Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>We Vote Nosotros Votamos -PP Advoc. Mar Monte PAC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 25 / 2016         </div>	
Mailing Address 1605 The Alameda			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           7183.50         </div>	
City San Jose	State CA	Zip Code 95126	<b>Transaction ID : B634112</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 25 / 2016         </div>	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A			Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           14367.00         </div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           14367.00         </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Catalist LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
Mailing Address 1090 Vermont Ave./Ste. 300			Amount <span style="border: 1px solid black; padding: 2px;">173.13</span>		
City Washington	State DC	Zip Code 20006	Transaction ID : <b>B634099</b>		
Purpose of Expenditure List acquisition-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		
Name of Federal Candidate: Bennett, LuAnn, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 10 State: VA <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">206391.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Catalist LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
Mailing Address 1090 Vermont Ave./Ste. 300			Amount <span style="border: 1px solid black; padding: 2px;">129.84</span>		
City Washington	State DC	Zip Code 20006	Transaction ID : <b>B634100</b>		
Purpose of Expenditure List acquisition-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: State: US <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">302.97</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Catalist LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1090 Vermont Ave./Ste. 300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
City Washington		State DC	Zip Code 20006		Amount <span style="border: 1px solid black; padding: 2px;">129.84</span>
Purpose of Expenditure List acquisition-Estimated costs			Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>		Transaction ID : <b>B634101</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
City New York		State NY	Zip Code 10038		Amount <span style="border: 1px solid black; padding: 2px;">145.32</span>
Purpose of Expenditure Staff time for direct voter contact-Estimated costs			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Transaction ID : <b>B634902</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: Portman, Rob, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1076550.04</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">129.84</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 123 William St, 10th Floor			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">145.33</div>		
City New York	State NY	Zip Code 10038	<b>Transaction ID : B634903</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1076550.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>76 Words</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 1806 Vernon St, NW #100			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div>		
City Washington	State DC	Zip Code 20009	<b>Transaction ID : B634102</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure photography/videography-note correction to estimate reported earlier		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: Comstock, Barbara, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">206391.26</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">2300.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 96 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 18 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">1770.00</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629884</b>		
Purpose of Expenditure Canvass Lit		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 18 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">1770.00</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629885</b>		
Purpose of Expenditure Canvass Lit		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">3540.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016	
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">2102.50</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629889</b>	
Purpose of Expenditure Canvass Lit		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2016	
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">2102.50</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B629890</b>	
Purpose of Expenditure Canvass Lit		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4205.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Northern California Action Fund</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address P.O. Box 1116				Amount <span style="border: 1px solid black; padding: 2px;">2488.29</span>	
City Concord		State CA		Zip Code 94522	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A				Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Northern California Action Fund</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address P.O. Box 1116				Amount <span style="border: 1px solid black; padding: 2px;">2488.29</span>	
City Concord		State CA		Zip Code 94522	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A				Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	
Name of Federal Candidate: Trump, Donald, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">4976.58</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(a) TOTAL</b> Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Northern California Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address P.O. Box 1116			Amount <span style="border: 1px solid black; padding: 2px;">2488.29</span>	
City Concord	State CA	Zip Code 94522	<b>Transaction ID : B634541</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Northern California Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address P.O. Box 1116			Amount <span style="border: 1px solid black; padding: 2px;">2488.29</span>	
City Concord	State CA	Zip Code 94522	<b>Transaction ID : B634542</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Purpose of Expenditure Canvassing-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;">4976.58</span>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(a) TOTAL Independent Expenditures .....</b>			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
<b>[Electronically Filed]</b>				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Blueprint Interactive</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 2229 North Pollard St			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016		
City Arlington	State VA	Zip Code 22207	Amount <span style="border: 1px solid black; padding: 2px;">50000.00</span>		
Purpose of Expenditure Digital Ad Buy-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B634544</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016		
Name of Federal Candidate: Hassan, Maggie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 123 William St, 10th Floor			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016		
City New York	State NY	Zip Code 10038	Amount <span style="border: 1px solid black; padding: 2px;">145.32</span>		
Purpose of Expenditure Staff time for direct voter contact-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Transaction ID : <b>B634545</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 101 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Action Fund Inc.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 123 William St, 10th Floor				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">145.33</div>	
City New York		State NY		Zip Code 10038	
Purpose of Expenditure Staff time for direct voter contact-Estimated costs				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: Clinton, Hillary, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Mission Control LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 624 Hebron Ave #200				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8250.00</div>	
City Glastonbury		State CT		Zip Code 06033	
Purpose of Expenditure Canvass Literature; note correction to earlier estimate				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Trump, Donald, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <b>[Electronically Filed]</b>          Date       </div> <div> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Mission Control LLC</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 624 Hebron Ave #200			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
City Glastonbury		State CT	Zip Code 06033		Amount <span style="border: 1px solid black; padding: 2px;">8250.00</span>
Purpose of Expenditure Canvass Literature; note correction to earlier estimate			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>B634555</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016
Name of Federal Candidate: Coffman, Mike, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">38885.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>Stones' Phones</b>			<input type="checkbox"/> Memo Item		
Mailing Address 41-750 Rancho Las Palmas Dr #E-3			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
City Rancho Mirage		State CA	Zip Code 92270		Amount <span style="border: 1px solid black; padding: 2px;">3893.72</span>
Purpose of Expenditure Phone calls-Estimated costs			Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>		Transaction ID : <b>B634581</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate District: US State: US
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">3893.72</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 103 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Mailing Address 41-750 Rancho Las Palmas Dr #E-3			Amount <span style="border: 1px solid black; padding: 2px;">3893.72</span>		
City Rancho Mirage		State CA	Zip Code 92270		Transaction ID : <b>B634582</b>
Purpose of Expenditure Phone calls-Estimated costs		Category/Type 003		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">4308940.94</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">32846.43</span>		
City Washington		State DC	Zip Code 20005		Transaction ID : <b>B634543</b>
Purpose of Expenditure Canvassing-Estimated costs		Category/Type 007		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016	
Name of Federal Candidate: Moore, Gwendolynne, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>04</b> State: <b>WI</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">32846.43</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">36740.15</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 104 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <b>Planned Parenthood Affiliates of California</b>			<input type="checkbox"/> Memo Item		
Mailing Address 555 Capitol Mall Suite 510			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
City Sacramento		State CA	Zip Code 95814		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">496.55</div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1943906.45</div>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: NV		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Planned Parenthood Affiliates of California</b>			<input type="checkbox"/> Memo Item		
Mailing Address 555 Capitol Mall Suite 510			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 22 / 2016</div> </div>		
City Sacramento		State CA	Zip Code 95814		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">496.55</div>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: US		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">993.10</div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 23 / 2016</div> </div>		

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Affiliates of California</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
Mailing Address 555 Capitol Mall Suite 510			Amount <span style="border: 1px solid black; padding: 2px;">496.55</span>		
City Sacramento	State CA	Zip Code 95814	Transaction ID : <b>B634537</b>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Work for Progress Inc</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Mailing Address 1543 Wazee St #440			Amount <span style="border: 1px solid black; padding: 2px;">27885.00</span>		
City Denver	State CO	Zip Code 80202	Transaction ID : <b>B634538</b>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">496.55</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Work for Progress Inc</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016
Mailing Address 1543 Wazee St #440			Amount <span style="border: 1px solid black; padding: 2px;">27885.00</span>		Transaction ID : <b>B634533</b>
City Denver	State CO	Zip Code 80202			
Purpose of Expenditure Canvassing-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016	
Name of Federal Candidate: Coffman, Mike, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">38885.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Planned Parenthood Affiliates of California</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016
Mailing Address 555 Capitol Mall Suite 510			Amount <span style="border: 1px solid black; padding: 2px;">496.55</span>		Transaction ID : <b>B634534</b>
City Sacramento	State CA	Zip Code 95814			
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2016	
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			▶ <span style="border: 1px solid black; padding: 2px;">496.55</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			▶ <span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			▶ <span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Bend the Arc Jewish Action, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><small>M M</small> 10</div> <div><small>D D</small> 30</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>		
Mailing Address 330 Seventh Ave., 19th floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5411.00</div>		
City New York	State NY	Zip Code 10001	<b>Transaction ID : B634640</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><small>M M</small> 10</div> <div><small>D D</small> 30</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Bend the Arc Jewish Action, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><small>M M</small> 10</div> <div><small>D D</small> 30</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>		
Mailing Address 330 Seventh Ave., 19th floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5411.00</div>		
City New York	State NY	Zip Code 10001	<b>Transaction ID : B634641</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><small>M M</small> 10</div> <div><small>D D</small> 30</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>			
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">10822.00</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-around;"> <div><small>M M</small> 12</div> <div><small>D D</small> 23</div> <div><small>Y Y Y Y Y Y</small> 2016</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 108 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Bend the Arc Jewish Action, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2016		
Mailing Address 330 Seventh Ave., 19th floor			Amount <span style="border: 1px solid black; padding: 2px;">5411.00</span>		
City New York	State NY	Zip Code 10001	Transaction ID : <b>B634634</b>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type 003	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2016		
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Bend the Arc Jewish Action, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2016		
Mailing Address 330 Seventh Ave., 19th floor			Amount <span style="border: 1px solid black; padding: 2px;">5411.00</span>		
City New York	State NY	Zip Code 10001	Transaction ID : <b>B634636</b>		
Purpose of Expenditure Canvassing-Estimated costs.In-Kind, see Sched A		Category/Type 003	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">10822.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 109 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 31 / 2016       </div>	
Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 31 / 2016       </div>		
Mailing Address    601 13th Street NW Suite 610N			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         12681.06       </div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B634637</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 31 / 2016       </div>		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="float: right;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div>		
Name of Federal Candidate: Heck, Joseph, , ,		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         1943906.45       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 31 / 2016       </div>		
Mailing Address    601 13th Street NW Suite 610N			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         32942.10       </div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B634639</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 31 / 2016       </div>		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="float: right;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div>		
Name of Federal Candidate: Toomey, Pat, , ,		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>PA</u>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         2667767.46       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         45623.16       </div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         45623.16       </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          12 / 23 / 2016       </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 110 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">3241.11</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B633537</b>		
Purpose of Expenditure Events		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
Mailing Address 7155 E. 38th Avenue			Amount <span style="border: 1px solid black; padding: 2px;">3241.10</span>		
City Denver	State CO	Zip Code 80207	Transaction ID : <b>B633538</b>		
Purpose of Expenditure Events		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">6482.21</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 111 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

M M /

D D /

Y Y Y Y Y Y

 Full Name of Payee ☐ Memo Item  
**Planned Parenthood Rocky Mountains Action Fund**

Mailing Address 7155 E. 38th Avenue

City	State	Zip Code
Denver	CO	80207

Purpose of Expenditure  
EventsCategory/  
Type 

007

Date of Public Distribution/Dissemination

M M /

D D /

Y Y Y Y Y Y

Amount

3241.10

**Transaction ID : B633539**

Date of Disbursement or Obligation

M M /

D D /

Y Y Y Y Y Y

Name of Federal Candidate:

Cortez-Masto, Catherine, , ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ SenateState: NV
 Calendar Year-To-Date  
 Per Election for Office Sought

1943906.45

 Disbursement For: ☐ Primary ☒ General  
 2016 ☐ Other (specify) ▶ \_\_\_\_\_

 Full Name of Payee ☐ Memo Item  
**Planned Parenthood Rocky Mountains Action Fund**

Mailing Address 7155 E. 38th Avenue

City	State	Zip Code
Denver	CO	80207

Purpose of Expenditure  
EventsCategory/  
Type 

007

Date of Public Distribution/Dissemination

M M /

D D /

Y Y Y Y Y Y

Amount

3241.10

**Transaction ID : B633540**

Date of Disbursement or Obligation

M M /

D D /

Y Y Y Y Y Y

Name of Federal Candidate:

Heck, Joseph, , ,

☐ Support☒ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ SenateState: NV
 Calendar Year-To-Date  
 Per Election for Office Sought

1943906.45

 Disbursement For: ☐ Primary ☒ General  
 2016 ☐ Other (specify) ▶ \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures .....

6482.20

(a) SUBTOTAL of Unitemized Independent Expenditures .....

(a) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

*[Electronically Filed]*

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 112 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Terris Barnes &amp; Walters</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016		
Mailing Address 400 Montgomery St # 700			Amount <span style="border: 1px solid black; padding: 2px;">2201.75</span>		
City San Francisco	State CA	Zip Code 94104	Transaction ID : <b>B628187</b>		
Purpose of Expenditure Canvass Lit-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Johnson, Ron, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">135199.93</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Terris Barnes &amp; Walters</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016		
Mailing Address 400 Montgomery St # 700			Amount <span style="border: 1px solid black; padding: 2px;">2201.75</span>		
City San Francisco	State CA	Zip Code 94104	Transaction ID : <b>B628188</b>		
Purpose of Expenditure Canvass Lit-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Feingold, Russ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">135199.93</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4403.50</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 113 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Terris Barnes &amp; Walters</b>			<input type="checkbox"/> Memo Item		
Mailing Address 400 Montgomery St # 700			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016		
City San Francisco		State CA	Zip Code 94104		
Purpose of Expenditure Canvass Lit-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">2201.75</span>	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Terris Barnes &amp; Walters</b>			<input type="checkbox"/> Memo Item		
Mailing Address 400 Montgomery St # 700			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 26 / 2016		
City San Francisco		State CA	Zip Code 94104		
Purpose of Expenditure Canvass Lit-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">2201.75</span>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4403.50</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 114 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 31 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">369.55</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B634718</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 31 / 2016		
Purpose of Expenditure Canvass Lit - Estimated Costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Kihuen, Ruben, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">1655.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Priorities USA</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 31 / 2016		
Mailing Address 601 13th Street NW Suite 610N			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">254376.84</div>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B634642</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 31 / 2016		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: State: US		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">254746.39</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FedEx Print Center</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016
Mailing Address 3 Colby Ct.			Amount <span style="border: 1px solid black; padding: 2px;">246.26</span>		Transaction ID : <b>B634644</b>
City Bedford	State NH	Zip Code 03110			
Purpose of Expenditure Small Item Distribution-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>API Source</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016
Mailing Address 4471 Nicole Dr.			Amount <span style="border: 1px solid black; padding: 2px;">33.00</span>		Transaction ID : <b>B634651</b>
City Lanham	State MD	Zip Code 20706			
Purpose of Expenditure Apparel Distribution-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">33.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 116 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">369.55</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634685</b>		
Purpose of Expenditure Canvass Lit - Estimated Costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Titus, Dina, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">1655.26</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">369.55</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634720</b>		
Purpose of Expenditure Canvass Lit - Estimated Costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2016		
Name of Federal Candidate: Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">1655.26</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">739.10</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 117 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report

New report

Amends report filed on

 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

 Full Name of Payee  
**Planned Parenthood Advocates of Ohio**
☐ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Mailing Address 206 E State St.

Amount

2438.81

 City  
 Columbus

 State  
 OH

 Zip Code  
 43215
**Transaction ID : B634911**

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

 Purpose of Expenditure  
 Phone calls-Estimated costs

 Category/  
 Type 007

Name of Federal Candidate:

Portman, Rob, , ,

☐ Support☒ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ Senate

State: OH

 Calendar Year-To-Date  
 Per Election for Office Sought

1076550.04

 Disbursement For: ☐ Primary ☒ General  
 2016 ☐ Other (specify) ►

 Full Name of Payee  
**Planned Parenthood Advocates of Ohio**
☐ Memo Item

Date of Public Distribution/Dissemination

 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

Mailing Address 206 E State St.

Amount

2438.81

 City  
 Columbus

 State  
 OH

 Zip Code  
 43215
**Transaction ID : B634915**

Date of Disbursement or Obligation

 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2016

 Purpose of Expenditure  
 Phone calls-Estimated costs

 Category/  
 Type 007

Name of Federal Candidate:

Strickland, Ted, , ,

☒ Support☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ Senate

State: OH

 Calendar Year-To-Date  
 Per Election for Office Sought

1076550.04

 Disbursement For: ☐ Primary ☒ General  
 2016 ☐ Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures .....

4877.62

(a) SUBTOTAL of Unitemized Independent Expenditures .....

(a) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 118 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <b>Bully Pulpit Interactive</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016	
Mailing Address 1140 Connecticut Ave NW #800		Amount <span style="border: 1px solid black; padding: 2px;">78000.00</span>		Transaction ID : <b>B634918</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016	
City Washington	State DC				
Purpose of Expenditure Online advertising-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Comstock, Barbara, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">206391.26</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

  

Full Name of Payee <b>76 Words</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016	
Mailing Address 1806 Vernon St, NW #100		Amount <span style="border: 1px solid black; padding: 2px;">4396.82</span>		Transaction ID : <b>B634925</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016	
City Washington	State DC				
Purpose of Expenditure Online video production-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">78000.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,
[Electronically Filed]

Signature
 Date MM / DD / YYYY  
12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 119 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>76 Words</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1806 Vernon St, NW #100			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016		
City Washington	State DC	Zip Code 20009	Amount <span style="border: 1px solid black; padding: 2px;">4396.83</span>		
Purpose of Expenditure Online video Production-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B634927</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Community Outreach Group LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave N.W. #300			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016		
City Washington	State DC	Zip Code 20005	Amount <span style="border: 1px solid black; padding: 2px;">78701.96</span>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Transaction ID : <b>B634930</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">78701.96</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 120 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <span style="border: 1px solid black; padding: 2px;">78701.96</span>	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634932</b>
Purpose of Expenditure Canvassing-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Planned Parenthood Advocates of Ohio</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016	
Mailing Address 206 E State St.		Amount <span style="border: 1px solid black; padding: 2px;">4529.22</span>	
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>B634934</b>
Purpose of Expenditure Canvassing-Estimated costs		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016
Name of Federal Candidate: Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">83231.18</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 121 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b>				New report    Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>		
Mailing Address 206 E State St.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           4529.22         </div>		
City Columbus	State OH	Zip Code 43215	<b>Transaction ID : B634938</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>			
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>		
Mailing Address 206 E State St.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2438.81         </div>		
City Columbus	State OH	Zip Code 43215	<b>Transaction ID : B634939</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>		
Purpose of Expenditure Phone calls-Estimated costs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>			
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">6968.03</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 23 / 2016         </div>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 122 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Advocates of Ohio</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Mailing Address 206 E State St.			Amount <span style="border: 1px solid black; padding: 2px;">2438.82</span>		
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>B634941</b>		
Purpose of Expenditure Phone calls-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <span style="border: 1px solid black; padding: 2px;">78701.95</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634904</b>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Name of Federal Candidate: Portman, Rob, , ,			Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1076550.04</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">81140.77</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 123 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634906</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <input type="text"/> 007	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1076550.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 206 E State St.			Amount <input type="text"/>		
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>B634907</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <input type="text"/> 007	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1076550.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<input type="text"/> 83231.17		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<input type="text"/>		
<b>(a) TOTAL Independent Expenditures .....</b>			<input type="text"/>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 124 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Advocates of Ohio</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Mailing Address 206 E State St.			Amount <span style="border: 1px solid black; padding: 2px;">4529.22</span>		
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>B634908</b>		
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Name of Federal Candidate: Portman, Rob, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1076550.04</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ib5k, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016		
Mailing Address 343 Carl Street			Amount <span style="border: 1px solid black; padding: 2px;">35000.00</span>		
City San Francisco	State CA	Zip Code 94117	Transaction ID : <b>B634944</b>		
Purpose of Expenditure Online video production-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016		
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4529.22</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 125 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Blueprint Interactive</b>			<input type="checkbox"/> Memo Item		
Mailing Address 2229 North Pollard St			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016		
City Arlington		State VA	Zip Code 22207		
Purpose of Expenditure Online advertising-Final cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">75090.00</span>	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee <b>Planned Parenthood New Hampshire Action Fund</b>			<input type="checkbox"/> Memo Item		
Mailing Address 18 Low Avenue			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2016		
City Concord		State NH	Zip Code 03301		
Purpose of Expenditure Staff Time for direct voter contact. In-Kind, see Sched. A		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>		Amount <span style="border: 1px solid black; padding: 2px;">57.50</span>	
Name of Federal Candidate: Hassan, Maggie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">75147.50</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Gustafson, Liz, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 126 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">11 / 04 / 2016</span>		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">19004.63</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634942</b>		
Purpose of Expenditure Mail production and postage - Final		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">11 / 04 / 2016</span>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">11 / 04 / 2016</span>		
Mailing Address 123 William St, 10th Floor			Amount <span style="border: 1px solid black; padding: 2px;">1125.00</span>		
City New York	State NY	Zip Code 10038	Transaction ID : <b>B635191</b>		
Purpose of Expenditure List rental-Estimated costs		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">11 / 04 / 2016</span>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">19004.63</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">12 / 23 / 2016</span>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">19004.63</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634896</b>		
Purpose of Expenditure Mail production and postage - Final Cost		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
Name of Federal Candidate: Hassan, Maggie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1001111.35</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">9502.32</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B634897</b>		
Purpose of Expenditure Mail production and postage - Final Cost		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
Name of Federal Candidate: Shea-Porter, Carol, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9502.32</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">28506.95</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 128 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>The Pivot Group</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2016							
Mailing Address    1720 I Street NW Suite 550				Amount <span style="border: 1px solid black; padding: 2px;">9502.32</span>							
City Washington		State DC		Zip Code 20005							
Purpose of Expenditure Mail production and postage - Final Cost				Transaction ID : <b>B634899</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2016							
Name of Federal Candidate: Kuster, Ann McLane, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NH							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9502.32</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Planned Parenthood New Hampshire Action Fund</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 03 / 2016							
Mailing Address    18 Low Avenue				Amount <span style="border: 1px solid black; padding: 2px;">57.50</span>							
City Concord		State NH		Zip Code 03301							
Purpose of Expenditure Staff Time for direct voter contact. In-Kind, see Sched. A				Transaction ID : <b>B635166</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2016							
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: US							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">9559.82</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">9559.82</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">9559.82</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016							

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 129 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 02 / 2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">32.81</div>	
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B635168</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 03 / 2016</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9.87</div>	
City Washington	State DC	Zip Code 20005	<b>Transaction ID : B635169</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">42.68</div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gustafson, Liz, , ,</u>			Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 23 / 2016</div> </div>	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 130 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>PP Action Fund of the Pacific Southwest</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1075 Camino del Rio S			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
City San Diego		State CA	Zip Code 92108		
Purpose of Expenditure Canvassing.In-Kind, see Sched A		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		Amount <span style="border: 1px solid black; padding: 2px;">1642.47</span>	
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee <b>PP Action Fund of the Pacific Southwest</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1075 Camino del Rio S			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016		
City San Diego		State CA	Zip Code 92108		
Purpose of Expenditure Canvassing.In-Kind, see Sched A		Category/ Type <span style="border: 1px solid black; padding: 2px;">007</span>		Amount <span style="border: 1px solid black; padding: 2px;">1642.47</span>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures .....</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures .....</p> <p>(a) TOTAL Independent Expenditures .....</p> </div> <div style="text-align: right;"> <span style="border: 1px solid black; padding: 2px;">3284.94</span>  <span style="border: 1px solid black; padding: 2px;"></span>  <span style="border: 1px solid black; padding: 2px;"></span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 131 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Action Fund of the Pacific Southwest</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1075 Camino del Rio S			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1642.47</div>	
City San Diego	State CA	Zip Code 92108	<b>Transaction ID : B635172</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px;">007</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1943906.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Action Fund of the Pacific Southwest</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1075 Camino del Rio S			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1642.47</div>	
City San Diego	State CA	Zip Code 92108	<b>Transaction ID : B635173</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px;">007</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1943906.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures .....	►	3284.94
(a) SUBTOTAL of Unitemized Independent Expenditures .....	►	
(a) TOTAL Independent Expenditures .....	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 132 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 601 13th Street NW Suite 610N			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City Washington	State DC	Zip Code 20005		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : <b>B635179</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Heck, Joseph, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1943906.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Priorities USA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 601 13th Street NW Suite 610N			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10000.00</div>	
City Washington	State DC	Zip Code 20005		
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : <b>B635180</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: McGinty, Katie, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2667767.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	12000.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 133 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799         </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>														
Full Name of Payee <input type="checkbox"/> Memo Item <b>Priorities USA</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2016										
Mailing Address 601 13th Street NW Suite 610N				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12000.00</div>										
City Washington		State DC		Zip Code 20005										
Purpose of Expenditure Digital Ad Buy-Estimated costs. In-Kind, see Sched. A				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____										
Full Name of Payee <input type="checkbox"/> Memo Item <b>Comm. Action Fund of PP of Orange and San Bernardino Ctys.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2016										
Mailing Address P.O. Box 6145				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">699.81</div>										
City Orange		State CA		Zip Code 92863										
Purpose of Expenditure Canvassing-note correction to estimate reported earlier. In-Kind, see Sched A				Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>										
Name of Federal Candidate: Heck, Joseph, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">12699.81</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	12699.81	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶		(a) TOTAL Independent Expenditures .....	▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	12699.81												
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶													
(a) TOTAL Independent Expenditures .....	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 23 / 2016										

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 134 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> </div>			
Full Name of Payee <input type="checkbox"/> Memo Item <b>Comm. Action Fund of PP of Orange and San Bernardino Ctys.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Mailing Address P.O. Box 6145		Amount <span style="border: 1px solid black; padding: 2px;">699.81</span>	
City Orange	State CA	Zip Code 92863	Transaction ID : <b>B635157</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Comm. Action Fund of PP of Orange and San Bernardino Ctys.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Mailing Address P.O. Box 6145		Amount <span style="border: 1px solid black; padding: 2px;">699.81</span>	
City Orange	State CA	Zip Code 92863	Transaction ID : <b>B635158</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">1399.62</span>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(a) TOTAL</b> Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 135 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Comm. Action Fund of PP of Orange and San Bernardino Ctys.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Mailing Address P.O. Box 6145			Amount <span style="border: 1px solid black; padding: 2px;">699.82</span>	
City Orange	State CA	Zip Code 92863	Transaction ID : <b>B635159</b>	
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">007</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016	
Mailing Address 123 William St, 10th Floor			Amount <span style="border: 1px solid black; padding: 2px;">93.55</span>	
City New York	State NY	Zip Code 10038	Transaction ID : <b>B635160</b>	
Purpose of Expenditure Staff time for direct voter contact		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Name of Federal Candidate: Clinton, Hillary, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">699.82</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 136 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> 11 / 02 / 2016         </div> </div>	
Mailing Address 123 William St, 10th Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>93.55</span> </div> </div>	
City New York	State NY	Zip Code 10038	<b>Transaction ID : B635161</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> 11 / 04 / 2016         </div> </div>
Purpose of Expenditure Staff time for direct voter contact		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: Trump, Donald, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>4308940.94</span> </div> </div>			

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Action Fund Inc.</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> 11 / 02 / 2016         </div> </div>	
Mailing Address 123 William St, 10th Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>33.60</span> </div> </div>	
City New York	State NY	Zip Code 10038	<b>Transaction ID : B635162</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> 11 / 04 / 2016         </div> </div>
Purpose of Expenditure List Rental		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	
Name of Federal Candidate: Clinton, Hillary, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>4308940.94</span> </div> </div>			

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span>0.00</span> </div> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span></span> </div> </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <span></span> </div> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Gustafson, Liz, , ,*

Signature

**[Electronically Filed]**

Date

M M M
D D D
Y Y Y Y Y Y

12 / 23 / 2016



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 137 OF 145  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Planned Parenthood Action Fund Inc.</b> <input checked="" type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2016	
Mailing Address 123 William St, 10th Floor				Amount <span style="border: 1px solid black; padding: 2px;">588.71</span>	
City New York		State NY	Zip Code 10038	Transaction ID : <b>B635163</b>	
Purpose of Expenditure Staff time for direct voter contact; note correction to earlier estimate			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>PP Advocacy Project LA County</b> <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2016	
Mailing Address 555 Capitol Mall, Suite 510				Amount <span style="border: 1px solid black; padding: 2px;">9571.10</span>	
City Sacramento		State CA	Zip Code 95814	Transaction ID : <b>B635183</b>	
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A			Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2016	
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">9571.10</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Advocacy Project LA County</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 05 / 2016</div> </div>		
Mailing Address 555 Capitol Mall, Suite 510			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9571.10</div>		
City Sacramento	State CA	Zip Code 95814	<b>Transaction ID : B635184</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 05 / 2016</div> </div>		
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>			
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1943906.45</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>PP Advocacy Project LA County</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 05 / 2016</div> </div>		
Mailing Address 555 Capitol Mall, Suite 510			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9571.10</div>		
City Sacramento	State CA	Zip Code 95814	<b>Transaction ID : B635185</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 05 / 2016</div> </div>		
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>			
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: US		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4308940.94</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">19142.20</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 23 / 2016</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>PP Advocacy Project LA County</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>555 Capitol Mall, Suite 510</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 05 / 2016</b>		
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95814</b>	Amount <span style="border: 1px solid black; padding: 2px;">9571.11</span>		
Purpose of Expenditure Canvassing-note correction to estimate reported earlier.In-Kind, see Sched A		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Transaction ID : <b>B635186</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 05 / 2016</b>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Blueprint Interactive</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>2229 North Pollard St</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 04 / 2016</b>		
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22207</b>	Amount <span style="border: 1px solid black; padding: 2px;">55588.00</span>		
Purpose of Expenditure Digital Ad Buy-Final cost		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>B635192</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 07 / 2016</b>		
Name of Federal Candidate: Trump, Donald, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">65159.11</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gustafson, Liz, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>12 / 23 / 2016</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Stones' Phones</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016	
Mailing Address 41-750 Rancho Las Palmas Dr #E-3		Amount <span style="border: 1px solid black; padding: 2px;">1208.21</span>	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : <b>B636178</b>
Purpose of Expenditure Phone calls-was included on 12/2/16 amended 10/18/16 48 Hr. report		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NV</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Stones' Phones</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016	
Mailing Address 41-750 Rancho Las Palmas Dr #E-3		Amount <span style="border: 1px solid black; padding: 2px;">1208.20</span>	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : <b>B636179</b>
Purpose of Expenditure Phone calls-was included on 12/2/16 amended 10/18/16 48 Hr. report		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NV</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">2416.41</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Gustafson, Liz, , ,</i>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">14497.45</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B633535</b>		
Purpose of Expenditure Canvass Lit-Final cost		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016		
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>US</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4308940.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>The Pivot Group</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016		
Mailing Address 1720 I Street NW Suite 550			Amount <span style="border: 1px solid black; padding: 2px;">14497.45</span>		
City Washington	State DC	Zip Code 20005	Transaction ID : <b>B633536</b>		
Purpose of Expenditure Canvass Lit		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2016		
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1943906.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">28994.90</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gustafson, Liz, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

  

Full Name of Payee <b>Stones' Phones</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 29 / 2016</b>	
Mailing Address <b>41-750 Rancho Las Palmas Dr #E-3</b>				Amount <span style="border: 1px solid black; padding: 2px;">3580.69</span>	
City <b>Rancho Mirage</b>	State <b>CA</b>	Zip Code <b>92270</b>		Transaction ID : <b>B634584</b>	
Purpose of Expenditure <b>Phone calls-note correction to estimate reported earlier</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">003</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>11 / 16 / 2016</b>	
Name of Federal Candidate: <b>Bennett, LuAnn, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>10</b> State: <b>VA</b>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">206391.26</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>Itzamna Translations Company</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>08 / 26 / 2016</b>	
Mailing Address <b>P.O. Box 1015</b>				Amount <span style="border: 1px solid black; padding: 2px;">56.29</span>	
City <b>Glendale</b>	State <b>AZ</b>	Zip Code <b>85311</b>		Transaction ID : <b>B623979</b>	
Purpose of Expenditure <b>Translation services.</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 25 / 2016</b>	
Name of Federal Candidate: <b>Cortez-Masto, Catherine, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">84287.32</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">3636.98</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,  
Signature
[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
**12 / 23 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Itzamna Translations Company</b>			<input type="checkbox"/> Memo Item		
Mailing Address P.O. Box 1015			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 26 / 2016		
City Glendale		State AZ	Zip Code 85311		Amount <span style="border: 1px solid black; padding: 2px;">56.29</span>
Purpose of Expenditure Translation services.			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>B623980</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">137094.71</span>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Itzamna Translations Company</b>			<input type="checkbox"/> Memo Item		
Mailing Address P.O. Box 1015			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 18 / 2016		
City Glendale		State AZ	Zip Code 85311		Amount <span style="border: 1px solid black; padding: 2px;">61.64</span>
Purpose of Expenditure Translation services; note correction to estimate reported earlier			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>B629886</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 08 / 2016
Name of Federal Candidate: Heck, Joseph, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">550037.95</span>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;">117.93</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"></span>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gustafson, Liz, , ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00489799       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Itzamna Translations Company</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address P.O. Box 1015			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">61.64</div>	
City Glendale	State AZ	Zip Code 85311		
Purpose of Expenditure Translation services; note correction to estimate reported earlier		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : <b>B629887</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Cortez-Masto, Catherine, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">550037.95</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Itzamna Translations Company</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address P.O. Box 1015			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">61.65</div>	
City Glendale	State AZ	Zip Code 85311		
Purpose of Expenditure Translation Services; note correction to estimate reported earlier		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : <b>B628175</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Name of Federal Candidate: Trump, Donald, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2149965.77</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	123.29
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gustafson, Liz, , ,

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

12

23

2016

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Itzamna Translations Company</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 18 / 2016	
Mailing Address P.O. Box 1015		Amount <span style="border: 1px solid black; padding: 2px;">61.65</span>	
City Glendale	State AZ	Zip Code 85311	Transaction ID : <b>B628176</b>
Purpose of Expenditure Translation Services; note correction to estimate reported earlier		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 08 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2149965.77</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>API Source</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 30 / 2016	
Mailing Address 4471 Nicole Dr.		Amount <span style="border: 1px solid black; padding: 2px;">1427.00</span>	
City Lanham	State MD	Zip Code 20706	Transaction ID : <b>B629888</b>
Purpose of Expenditure Apparel and Distribution		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 17 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2149965.77</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">1488.65</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">2512935.44</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gustafson, Liz, , , Signature		[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 23 / 2016	